

\$71.94, but that same drug in Europe sells for \$44.10.

Now, these are the same drugs, Mr. Speaker. They are made by the same companies in the same FDA approved facilities.

Now the big pharmaceutical companies are arguing safety. They are saying we have got to worry about safety. That is a legitimate concern. I am concerned about safety as well. But remember this, a drug that consumers cannot afford is neither safe nor effective.

Today in America, 14 million seniors have no prescription drug coverage. That speaks also to the some 53 million Americans who have no other health insurance. So we may be talking about as many as 57 million Americans who were forced to pay full retail price for these drugs. They get no help.

Now, some people say, well they have price controls in other countries, and that is true. In some countries, they do have price controls. But it is also true there are countries in Europe that have no price controls. Yet, we pay in America sometimes three times more for exactly the same drug.

Now, Mr. Speaker, I am not asking for bulk importation this year, although I believe an amendment will be offered, and I will certainly support it. All I am really asking for is a clarification so that American consumers that have a legal prescription for a legal drug in the United States from any G-8 country or any NAFTA signatory country ought to be able to get those drugs from those countries at world market prices.

I believe that if we could simply have access to drugs at world market prices, because I am a free trader, I do not believe in price controls, but I do believe that ultimately markets are more powerful than armies. If Americans have access to those markets, we will see drug prices in the United States come down by at least 30 percent. And 30 percent last year or the last year that we have numbers for seniors, they spent something like \$50 billion on prescription drugs. Thirty percent of \$50 billion is real money even here in Washington.

So I am not asking for the world. I am simply saying we need a clarification for our own FDA that law-abiding citizens with a legal prescription ought to be able to buy drugs at world market prices. If they want to use the Internet, that is up to them. Or if they want to go through their local pharmacy, I would certainly permit that as well. But we are not going to stand idly by.

I ask my colleagues, if they could explain this chart and these differentials to their seniors in their districts or their consumers in their districts, then they have every right to vote against my amendment. But if they cannot explain this, I expect that they will be asked by seniors and others in their district why they voted against the amendment. It will be a simple amendment. We hope to offer it later this

week. We appreciate our colleagues' support.

#### OUTRAGEOUSLY HIGH DRUG PRICES (For a 30-day supply)

Drug	U.S. price	Euro. price
Allegra 120 .....	\$69.99	\$20.88
Atarax .....	28.62	4.20
Biaxin 250 .....	113.25	61.74
Claritin .....	63.06	16.06
Coumadin .....	37.74	8.22
Glucophage .....	30.12	4.11
Lipitor .....	52.86	41.25
Premarin .....	17.10	9.90
Prozac .....	71.94	44.10
Zestril 5 .....	25.92	5.52
Zithromax 500 .....	486.00	176.19
Zyrtec .....	50.10	17.73

□ 1900

The SPEAKER pro tempore (Mr. KENNEDY of Minnesota). Under a previous order of the House, the gentleman from California (Mr. FILNER) is recognized for 5 minutes.

(Mr. FILNER addressed the House. His remarks will appear hereafter in the Extension of Remarks.)

#### ILLEGAL NARCOTICS IN AMERICA

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. SOUDER) is recognized for 5 minutes.

Mr. SOUDER. Mr. Speaker, I wanted to raise a couple of things that were in yesterday's newspaper that illustrate that as much as we would like the drug problem in America to go away, it has not gone away.

The front page of The New York Times says, "Violence Rises as Club Drug Spreads Out Into the Streets." And it is yet another story about Ecstasy. On the front page of USA Today just a month ago, "Ecstasy Drug Trade Turns Violent." What we see from the charts is that it is exploding on the West Coast, it is stabilized on the East Coast, in the Midwest it is soaring; and in the south it is roughly stabilized.

We are seeing more and more kids realize the extreme dangers as more and more overdose, as more and more lose ground in their schooling as they see side effects like depression, particularly at the so-called rave parties which have been featured a lot in New Orleans and other places on some national TV shows. Just as crack cocaine became an epidemic in America, we are seeing the start of the Ecstasy movement. This is partly because of the drug legalization movement in the Netherlands and in Europe. We are seeing Ecstasy exported from Belgium and the Netherlands into the U.S. It is increasingly becoming the drug of choice. We need to be aggressive in our law enforcement, we need to be aggressive in our prevention and treatment programs, in our outreach programs, as well as our interdiction programs.

In the Indianapolis Star yesterday, the headline says, "Drug Test Ban Felt at State Schools. Ball State University survey shows rise in drug and alcohol

use and student discipline since court rejected policy."

A number of years ago, when I was a staffer for former Senator Dan Coats, we allowed drug-free schools money to be used for drug testing of student athletes. This policy had been spreading through the United States and beyond just the athletic departments to general, random drug testing. In my district, at East Noble High School, at Fremont High School, we had several model programs developed. In Anderson High School, a State court ruled that drug testing the students was illegal search and seizure.

How exactly are we supposed to do prevention programs if the court decides it is the legislative body and does not have any legal precedent with which to decide that but makes that decision?

What we do know, and ironically it took a court decision to overturn a broad drug testing policy of schools, is in fact that in Indiana drug use and alcohol use had gone down, and then when they were ordered to stop the program, in 1 year it has gone back up. So the question is, as we see the results when a program is pulled back, not whether drug testing works, it is how can we do it in a constitutional way, that is sensitive to the individual, whether in the workplace, whether at school or wherever it be? Because drug testing is one of the most effective prevention programs. We have maintained this for years, and this new study in Indiana proves it.

Unless we all work together in prevention, in treatment, in interdiction, and in law enforcement, we are going to continue to lose many more of our young people and adults to the scourge of illegal narcotics.

#### REJECT RENAMING OF NATIONAL AIRPORT IN METRO SYSTEM

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Virginia (Mr. MORAN) is recognized for 5 minutes.

Mr. MORAN of Virginia. Mr. Speaker, tomorrow this House is scheduled to consider the transportation appropriation bill. Within that bill there is a provision requiring that the local governments in the Washington, D.C. area spend hundreds of thousands of dollars of their own money to add the name of Ronald Reagan to the Metro system every place it says National Airport.

Now, the local governments have the authority to do this. When a local government requests a name change, the name of the Metro station within its jurisdiction is changed. That deference to local government is really one of the principal things that Ronald Reagan stood for. But this body, deciding that it did not like the fact that the local government had resisted adding those two additional names, is now going to require them to do so, even though this is not a Federal facility. It gets only 6 percent Federal money, 94 percent of